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PTO/SB/01 (3-97)

Approved for use through 6/30/98. OMB 0651-0032

Patent and Trademark Office; US DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION	Attorney Docket No.	71354-0453	
	First Named Inventor		
	COMPLETE IF KNOWN		
	Application No.	10/598,954	
	Filing Date	September 15, 2006	
	Group Art Unit		
<input type="checkbox"/> Declaration submitted with or initial filing	<input checked="" type="checkbox"/> Declaration submitted after initial filing	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (only if one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DYNAMIC SUPPORT MEANS FOR APPLIANCES SUCH AS REFRIGERATORS, FREEZERS AND
THE LIKE

(Title of the Invention)

the specification of which

☐ is attached hereto

or

☒ was filed on September 15, 2006, as United States Application Number or PCT International Application Number: 10/598,954 and was amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
MI2004U000106	IT	03/16/2004		<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number (s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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DECLARATION - Utility Or Design Patent Application					
<p>I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application or the motto provided by the first paragraph of Title 35, United States Code §112, I acknowledge the date to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.</p>					
U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)		
	PCT/EP2005/050982	03/04/2005			
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB-02B attached hereto.					
<p>As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transmit all business in the Patent and Trademark Office connected therewith: <input checked="" type="checkbox"/> Customer Number 20915</p> <p>or</p> <p><input type="checkbox"/> Registered practitioner(s) name/registration number listed below</p>					
Name		Registration No.	Name		Registration No.
John E. McGarry		22,360	G. Thomas Williams		42,228
Joel E. Bair		33,356	Michael F. Kelly		50,859
Mark A. Davis		37,118			
<input type="checkbox"/> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB-02C attached hereto.					
Direct all correspondence to <input checked="" type="checkbox"/> Customer Number			20915		or <input type="checkbox"/> Correspondence Address below
or Bar Code Label					
Name	Mark A. Davis, Reg. No. 37,118				
	McGarry Bair PC				
Address	171 Monroe Avenue, NW, Suite 600				
City, State, Zip	Grand Rapids, Michigan 49503				
Country	US	Telephone	616-742-3500	Fax	616-742-1010
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like in a case made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
Name of Sole or First Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor.			
Given Name (first and middle [if any])			Family Name or Surname		
Augusto			Ribolzi		
Inventor's Signature				Dated	
Residence: City	Travendona Monate	Country	IT	Citizenship	IT
Post Office Address	Via Mario Davi 40/16				
City	Travendona Monate	Zip	21028	Country	IT
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>one</u> supplemental additional inventor(s) sheet(s) PTO/SB-02A attached hereto.					

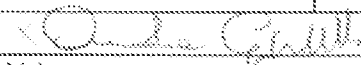
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Name of Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Andrea		Giridello			
Inventor's Signature				Dated	
Residence: City	Malnate	Country	IT	Citizenship	IT
Post Office Address	Via Carna 3				
City	Malnate	Zip	21046	Country	IT